



Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

2132
#8
4-29-03
JMD

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/589,427
		Filing Date	June 7, 2000
		First Named Inventor	Yechiam YEMINI
		Group Art Unit	2132
		Examiner Name	
Total Number of Pages in This Submission		Attorney Docket Number	18704-009

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) Sheet (s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO-1449 with cited references
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Proskauer Rose LLP 1585 Broadway New York, New York 10036 Tel. 212.969.3000		

RECEIVED

APR 25 2003

Technology Center 2100

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Tzvi Hirshaut, Reg. No. 38,732 Proskauer Rose LLP
Signature	
Date	Apr 21, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Apr 21, 2003

Typed or printed name	Alexander Migirov		
Signature		Date	Apr 21, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FAXES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re: U.S. Patent
Application of : Yechiam YEMINI, et al.
Entitled : IDENTIFICATION OF AN
ATTACKER IN AN ELECTRONIC
SYSTEM
Serial No. : 09/589,427
Filing Date : June 7, 2000

**SUPPLEMENTAL
INFORMATION
DISCLOSURE
STATEMENT**

RECEIVED

APR 25 2003

Technology Center 2100

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Pursuant to 37 C.F.R. § 1.56, Applicants submit herewith a PTO-1449 form and copies of the references listed thereon.

It is requested that the references cited in the accompanying PTO-1449 form be considered herein. This Supplemental Information Disclosure Statement is filed before the issuance of the first Office Action on the merits. Therefore, no fee is due. If any fee is due, the Commissioner is hereby authorized to charge this fee to the Deposit Account 16-2500.

Respectfully submitted,
PROSKAUER ROSE LLP
Attorneys for the Applicant(s)

By Tzvi Hirshaut
Tzvi Hirshaut
Reg. No. 38,732

Date: April 21, 2003

PROSKAUER ROSE LLP
1585 Broadway
New York, NY 10036
Tel: (212) 969-3000

Enclosures: PTO-1449 Form w/ references